	JECT	10.44
PKU	11-11	11744



## Grove City Planning Commission LOT SPLIT APPLICATION

DEC 3 1 2015

Please provide the requested information and submit to:

**DEVELOPMENT DEPARTMENT** 4035 BROADWAY GROVE CITY, OHIO 43123

GC PLANTINGS COMMISSION

	61	4-277-3004	grovecityohio.gov/devel	opment		
PROJECT / PROPERT	Y INFORMATION					
PROJECT NAME:	HE WOOL	SATP	TWNACLE			
PROJECT LOCATION: 5	Moffin	acle Ciulo	Drue 160' East of Mc Nulty Stre	et_		
PARCEL ID NUMBER: 04	0-015397	-00 AC	CREAGE AFFECTED BY THIS APPLICATION: 22.898			
EXISTING ZONING: Sin 41	etamilyres	s. dential E)	USTING LAND USE: Vacant/Agnicultural	***		
PROPOSED ZONING	«family re	Side Ital Pr	ROPOSED LAND USE: Single family resid	ential		
PROPERTY OWNER I						
			coordance with the Franklin County Auditor's Office.			
RICHARDE MCI	Clish 1347	2 Hulton	City State, Zip			
Name	Add	dress	City, State, Zip			
Phone	Fax	c	Email			
APPLICANT INFORMA	ATION					
Note: The applicant is the person						
Paul 5 Coppe L Name	Exec	utive Vice	President Schottenstein Homes 1	LLC		
Name	Titl	e	Company / Organization			
140 Mill Street	Gal	nanna	Oli. U 43230 State, Zip			
Address	City	/	State, Zip			
614-478-1100	į.		PC@SC-Int.Com			
Phone	Fai	ζ.	Email			
	s on behalf of the appli		applicant. As the authorized representative you have the proper authoris not take any responsibility for the lack of communication between the			
AUTHORIZED REPRE	SENTATIVE	-7,500	Check box if same as Applic	THE RESERVE AND ADDRESS OF THE PARTY OF THE		
JeffreyAMill	er Vi	ce Presid	Company / Organization  Gent Civil & Environmental Company / Organization  Gent Company / Organization  Gent Company / Organization  Ohio 43085  State, Zip  Mille Concerned Company	onsultant.		
Name	Titl	e .	Company / Organization	<del></del>		
250 old will son	Bridgeld	(northing	19tun Ohio 43085			
Address	Cit	у '	State, Zip			
614-310-2078			JMiller Cecincia	om		
Phone	Fax	(	Email			
Relationship to the Applicant (e		neer, architect, land	planner, contractor, etc.)			
SUBMITTAL REQUIR	EMENTS					
Instructions: All blanks/boxes must be completed or checked in order for the application submittal to be considered complete. The submittal shall include the required number of copies (properly folded and collated) and contain all required supplementary documentation. Submitted materials shall be accurate, measurable and shall address all required checklist items contained within the attached supplemental requirements.						
	Fee Calc	ulation	Submittal Items	(check box)		
Application Fee:	\$	50.00	Completed Application (signed and notarized):			
			Submittal Fee:	ø,		
			Ten (10) copies of plans (folded and collated):	ď		

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PROPERTY OWNER AUTHORIZATION OF APPLICANT SUBMI	TAL AND SIT	E VISIT(S)					
1, ti	e current pro	operty owner he	reby authorize the				
applicant	to su	bmit this applicat	ion. I agree to be				
bound by all representations and agreements made by the applicant and/or their authorized representative.							
Additionally, as the current property owner, knowing that site visits to the property may be necessary, I hereby authorize							
City representatives to visit and/or photograph the property described	n this applicati	ion.					
Signature of Current Property Owner:		Date:	<u> </u>				
STATE OF OHIO, COUNTY OF FRANKLIN							
The above individual(s), being first duly sworn, deposes on oath and says that he/she has read the foregoing affidavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.							
SUBSCRIBED AND SWORN TO before me this day of		., 20					
Official Seal and Signature of Notary Public							
APPLICANT'S / AUTHORIZED REPRESENTATIVE'S AFFIDAVIT							
Paul Scoppel	, the a	oplicant or authori	zed representative,				
have read and understand the contents of this application. The inform							
and other information submitted is complete and in all respects true at	d correct, to th	ne best of my know	vledge and belief.				
Signature of Applicant or Authorized Representative: Paul S.	Coppel	Date:	12/31/15				
STATE OF OHIO, COUNTY OF FRANKLIN							
The above individual(s), being first duly sworn, deposes on oath and says that he/she has read the foregoing affidavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.							
SUBSCRIBED AND SWORN TO before me this 31 day of	nber	_ 20 <u>15</u>					
Christina Lamkin							
Official Seal and Signature of Notary Public							
FOR OFFICE USE ONLY							
DATE RECEIVED: 12/31/15 RECEIVED BY: TP		PAYMENT AMOUNT:	50.00				
TENTATIVE PC MEETING DATE: PC RECOMMENDATION:		CHECK NUMBER:					
PROJECT ID NUMBER: 2015 12 31 0091							